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Serial Number: 09/899,424

Filing Date: July 3, 2001

DISTRIBUTION THEORY BASED ENRICHMENT OF SPARSE DATA FOR MACHINE LEARNING

CONCLUSION

Applicant respectfully submits that the claims are in condition for allowance and notification to that effect is earnestly requested. The Examiner is invited to telephone Applicant's attorney (612) 373-6972 to facilitate prosecution of this application.

If necessary, please charge any additional fees or credit overpayment to Deposit Account No. 19-0743.

Respectfully submitted,

RAVINDRAK. SHETTY

By his Representatives,

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CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Mail Stop AF, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this day of May, 2006.

Name

Signature

MENDMENT

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 CLAIMS AS FILED - PART I SMALL ENTITY (Column 1) OTHER THAN (Column 2) TYPE ___ TOTAL CLAIMS OR SMALL ENTITY RATE FEE FOR RATE FEE NUMBER FILED NUMBER EXTRA BASIC FEE BASIC FEE TOTAL CHARGEABLE CLAIMS minus 20= X\$ 25= X\$50= INDEPENDENT CLAIMS OR minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT X100= X200= OR +180= * If the difference in column 1 is less than zero, enter "0" in column 2 +360= OR TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** (Column 1) OTHER THAN (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS OR **ENDMENTA** HIGHEST REMAINING NUMBER ADDI-PRESENT **AFTER** ADDI-PREVIOUSLY **EXTRA** RATE TIONAL MENDMENT RATE PAID FOR TIONAL FEE Total FEE Minus 0 X\$ 25= Independent X\$50= OR Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100 =X200= OR +180= OR +360= TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS 8 HIGHEST REMAINING AMENDMENT **NUMBER** ADDI-PRESENT **AFTER** ADDI-**PREVIOUSLY EXTRA** RATE AMENDMENT TIONAL PAID FOR TIONAL RATE FEE Total FEE Minus X\$ 25= Independent X\$50= OR Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100 =X200= OR +180= OR +360= TOTAL TOTAL ADDIT. FEE OR ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDI-AFTER PREVIOUSLY ADDI-AMENDMENT **EXTRA** RATE TIONAL RATE PAID FOR TIONAL FEE Total FEE Minus X\$ 25= Independent X\$50=OR Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100 =X200= OR +180= +360= OR